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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Tiffany First name L. Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	White Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2198	

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Case number (if known)

Debtor 1 Tiffany L. White

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live		If Debtor 2 lives at a different address:
		541 E. 148th PI Harvey, IL 60426 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Tiffany L. White Case number (if known)

art	Tell the Court About	Your Ba	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	☐ Ch	napter 7				
		☐ Ch	apter 11				
		☐ Ch	apter 12				
		■ Ch	napter 13				
3.	How you will pay the fee		I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.				's check, or money
			I need to pay The Filing Fe	the fee in insta e in Installments	allments. If you choose this or (Official Form 103A).	otion, sign and attach the Application for I	ndividuals to Pay
			but is not req	request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, ut is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that pplies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out			
			the <i>Applicatio</i>	on to Have the C	hapter 7 Filing Fee Waived (O	fficial Form 103B) and file it with your peti	tion.
€.	Have you filed for ■ No. bankruptcy within the						
	last 8 years?	☐ Yes					
			District				
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	□ No.	. Go to l	ine 12.			
	residence:	■ Yes	s. Has yo	ur landlord obtai	ned an eviction judgment again	inst you and do you want to stay in your re	esidence?
				No. Go to line 1	2.		
				Yes. Fill out <i>Init</i> bankruptcy petit		on Judgment Against You (Form 101A) an	d file it with this

Document Page 4 of 65 Case number (if known) Debtor 1 Tiffany L. White Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Tiffany L. White Document Page 5 of 65

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Tiffany L. White		Document	Page 6 01 65 Case numbe	Γ (if known)			
Par		ions for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consum individual primarily for a personal, to		ned in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that	at are not consumer debts or busines	s debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.		estimate that after any exempt properto distribute to unsecured creditors?	erty is excluded and administrative expenses			
	administrative expenses are paid that funds will		□ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	□ 50-99		□ 5001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000			
		☐ 100-19 ☐ 200-99		☐ More than 100,000				
19.	How much do you	S \$0 - \$8	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you estimate your liabilities	= \$0 - \$9	50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	7: Sign Below							
For	you	I have ex	amined this petition, and I declare u	nder penalty of perjury that the inforn	nation provided is true and correct.			
				aware that I may proceed, if eligible, vailable under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.			
			rney represents me and I did not pay it, I have obtained and read the notic	y or agree to pay someone who is no be required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this			
		I request	relief in accordance with the chapte	r of title 11, United States Code, spec	cified in this petition.			
		bankrupto and 3571	cy case can result in fines up to \$25 .		or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519			
		Tiffany	ny L. White L. White e of Debtor 1	Signature of Debto	r 2			
		Executed	I on July 5, 2016	Executed on				
			MM / DD / YYYY	MM	/ DD / YYYY			

Debtor 1 Tiffany L. White Document Page 7 of 65

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ George	M. Vogl, IV ARDC #	Date	July 5, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
George M.	. Vogl, IV ARDC #		
	Vu & Borges, LLC		
105 W. Ma	dison		
23rd Floor	•		
Chicago, I	L 60602		
Number, Street,	City, State & ZIP Code		
Contact phone	312-853-0200	Email address	notice@billbusters.com
6273590			
Bar number & S	tato		

		Docume	ent Page 8 of 6	05	•
Fill in this informa	ation to identify your	case:			
Debtor 1	Tiffany L. White				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	cruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,182.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,182.00
Pa	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	8,714.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	978.57
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	36,272.02
	Your total liabilities	\$	45,964.59
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	654.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	439.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	■ Yes What kind of debt do you have?		
٠.	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	family, or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 9 of 65 Case number (if known) Debtor 1 Tiffany L. White

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,213.22 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	978.57
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,967.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	4,945.57

	Documen:	t Page 10 of 65		
Fill in this information to identify your case	and this filing:			
Debtor 1 Tiffany L. White				
First Name	Middle Name	Last Name		
Debtor 2	Michilla Mana	LastNama		
(Spouse, if filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: NO	RTHERN DISTRICT OF	ILLINOIS		
Case number			-	7 Check if this is an
				 Check if this is an amended filing
Official Farms 400 A/D				
Official Form 106A/B				
Schedule A/B: Proper	ty			12/15
n each category, separately list and describe iter hink it fits best. Be as complete and accurate as nformation. If more space is needed, attach a sep Answer every question.	possible. If two married porate sheet to this form.	people are filing together, both ar On the top of any additional page	e equally responsible for supp	olying correct
Part 1: Describe Each Residence, Building, Lan	d, or Other Real Estate Yo	ou Own or Have an Interest In		
. Do you own or have any legal or equitable inte	rest in any residence, bui	lding, land, or similar property?		
-				
■ No. Go to Part 2.				
☐ Yes. Where is the property?				
Part 2: Describe Your Vehicles				
Do you own, lease, or have legal or equitab				
3. Cars, vans, trucks, tractors, sport utility □ No ■ Yes	vehicles, motorcycles			
Caturn			Do not deduct secured clair	ns or exemptions. Put
3.1 Make: Saturn	=	in the property? Check one	the amount of any secured	claims on Schedule D:
Model: Aura Year: 2008	_ Debtor 1 only		Creditors Who Have Claims	s Securea by Property.
Year: 2008 Approximate mileage: 163000	_ ☐ Debtor 2 only ☐ Debtor 1 and Deb	tor 2 only		Current value of the portion you own?
Other information:	_ At least one of the	•	p	,
	☐ Check if this is c		\$4,250.00	\$2,125.00
	(see instructions)			
4. Watercraft, aircraft, motor homes, ATVs Examples: Boats, trailers, motors, personal ■ No □ Yes	watercraft, fishing vesse	ls, snowmobiles, motorcycle ac	ccessories	
5 Add the dollar value of the portion you on pages you have attached for Part 2. Write Part 3: Describe Your Personal and Household	te that number here			\$2,125.00
Do you own or have any legal or equitable		ollowing items?	po Do	urrent value of the ortion you own? o not deduct secured aims or exemptions.
6. Household goods and furnishings				

Examples: Major appliances, furniture, linens, china, kitchenware

■ No

Official Form 106A/B Schedule A/B: Property

D	ebtor 1	Tiffany L. White	Doc 1	Document	Page 11 of 65 Case number (if kn	
	☐ Yes.	Describe				
7.	Electror Example				ment; computers, printers, scanners; mu	sic collections; electronic devices
		Describe				
8.		bles of value es: Antiques and figurines; p other collections, memo			oks, pictures, or other art objects; stamp,	coin, or baseball card collections;
		Describe				
9.		ent for sports and hobbies es: Sports, photographic, ex musical instruments		ther hobby equipment; t	picycles, pool tables, golf clubs, skis; car	oes and kayaks; carpentry tools;
	☐ Yes.	Describe				
10). Firearn Examµ ■ No	ns oles: Pistols, rifles, shotguns	, ammunition	, and related equipment		
		Describe				
11	_ `	s oles: Everyday clothes, furs,	leather coats	s, designer wear, shoes,	accessories	
	■ No □ Yes.	Describe				
12	■ No		ume jewelry, e	engagement rings, wedd	ding rings, heirloom jewelry, watches, ge	ms, gold, silver
13	Examp ■ No	rm animals bles: Dogs, cats, birds, horse Describe	es			
14	. Any ot ■ No	her personal and househo	old items you	ı did not already list, ir	ncluding any health aids you did not li	st
	☐ Yes.	Give specific information				
1		he dollar value of all of yo art 3. Write that number he			ny entries for pages you have attached	\$0.00
		scribe Your Financial Assets				
D	o you ow	vn or have any legal or equ	uitable intere	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	☐ No	oles: Money you have in you			sit box, and on hand when you file your	petition
					Cash	\$25.00

Official Form 106A/B Schedule A/B: Property page 2

Page 12 of 65
Case number (if known) Document Debtor 1 Tiffany L. White 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Checking **Woodforest Bank** \$30.00 17.1. **Woodforest Bank** \$2.00 17.2. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No

Case 16-22019

Doc 1

Filed 07/08/16

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Desc Main

		Doc 1 Filed 07, Docum		Entered 07/08/16 14:08:41 Page 13 of 65	Desc Main
Debtor 1	Tiffany L. White			Case number (if known)	
☐ Yes.	Give specific information about	out them			
Money or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	unds owed to you Give specific information abo	out them, including whether	er you alre	ady filed the returns and the tax years	
■ No		limony, spousal support, c	child suppo	ort, maintenance, divorce settlement, property	settlement
Examp ■ No				efits, sick pay, vacation pay, workers' comper	nsation, Social Security
Examp ■ No	Name the insurance compan	_		HSA); credit, homeowner's, or renter's insurar Beneficiary:	Surrender or refund value:
If you a someo	erest in property that is duare the beneficiary of a living ne has died. Give specific information			od surance policy, or are currently entitled to rece	eive property because
Examp ■ No	against third parties, whet bles: Accidents, employment Describe each claim			t or made a demand for payment to sue	
■ No	contingent and unliquidated Describe each claim	d claims of every nature	, includin	g counterclaims of the debtor and rights to	set off claims
35. Any fin	ancial assets you did not a	Iready list			
■ No □ Yes.	Give specific information				
	he dollar value of all of you art 4. Write that number her		_	ny entries for pages you have attached	\$57.00
Part 5: Des	scribe Any Business-Related P	roperty You Own or Have a	ın Interest I	n. List any real estate in Part 1.	
37. Do you o	own or have any legal or equita	ble interest in any busines	s-related p	roperty?	

Official Form 106A/B Schedule A/B: Property page 4

 \square Yes. Go to line 38.

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Case number (if known) Document Debtor 1 Tiffany L. White Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$2,125,00 57. Part 3: Total personal and household items, line 15 \$0.00 Part 4: Total financial assets, line 36 \$57.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$2,182.00 Copy personal property total \$2,182.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$2,182.00

			Document	Page 15	of 65	<u>_</u>
Fill	in this inforn	nation to identify your	case:			
De	btor 1	Tiffany L. White				
_		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS		
		mapie, countre me				
	se number nown)					☐ Check if this is an amended filing
Οſ	ficial Fo	rm 106C				
			operty You Cla	im as Ev	/emnt	AIAC
<u> </u>	Siledule	C. IIIC FIC	perty rou cia	IIII as LA	Kempt	4/16
the nee	property you li	sted on <i>Schedule A/B: F</i> d attach to this page as i	Property (Official Form 106A/B)	as your source, lis	st the property that you	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any fun exe	cific dollar an applicable st ds—may be u mption to a p	nount as exempt. Alter atutory limit. Some exc nlimited in dollar amou	natively, you may claim the for emptions—such as those for unt. However, if you claim an	ıll fair market va health aids, righ exemption of 10	lue of the property be ts to receive certain k 0% of fair market valu	One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement the under a law that limits the t, your exemption would be limited
Pa	rt 1: Identif	y the Property You Cla	im as Exempt			
1.	Which set of	exemptions are you c	laiming? Check one only, ever	if your spouse is	filing with you.	
	You are cla	aiming state and federal	nonbankruptcy exemptions. 1	1 U.S.C. § 522(b)	(3)	
		•	ns. 11 U.S.C. § 522(b)(2)		(-)	
2		,	ule A/B that you claim as exe	mnt fill in the int	formation below	
۷.		on of the property and line	•	• ′	temption you claim	Specific laws that allow exemption
		that lists this property	portion you own	Amount of the ex	demption you claim	opecine laws that allow exemption
			Copy the value from Schedule A/B	Check only one bo	ox for each exemption.	
	Cash		\$25.00	_	\$25.00	735 ILCS 5/12-1001(b)
	Line from Sch	nedule A/B: 16.1		■	<u> </u>	
				10070 01 10	ir market value, up to able statutory limit	
	_	Woodforest Bank	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
	Line from Sch	nedule A/B: 17.1	<u> </u>	□ 100% of fa	ir market value, up to	
				.00700.10	able statutory limit	
		oodforest Bank	\$2.00		\$2.00	735 ILCS 5/12-1001(b)
	Line from Scr	nedule A/B: 17.2			ir market value, up to	
				апу аррііса	able statutory limit	
3.			mption of more than \$160,379 d every 3 years after that for ca		er the date of adjustme	nt.)
	☐ Yes. Did	you acquire the propert	y covered by the exemption with	hin 1,215 days be	efore you filed this case	?
)	•	-		

Official Form 106C

Yes

	Case 1	6-22019	Doc 1	Filed 07/08/16	Entered Page 16	l 07/08/16 14:0 of 65)8:41	Desc M	1ain
Fill in this in	formation	to identify you	ır case:						
Debtor 1		fany L. White		dle Name	Last Name				
Debtor 2 (Spouse if, filing)	First	Name	Mid	dle Name	Last Name				
United States	s Bankrupto	cy Court for the:	NORTH	ERN DISTRICT OF ILLI	INOIS				
Case number	r							_	if this is an ded filing
Official Fo Schedu			Who H	Have Claims S	Secured	by Property	/		12/15
	y the Additi			d people are filing togethe the entries, and attach it to					
. Do any credi	itors have c	laims secured by	y your prope	rty?					
☐ No. Cl	heck this be	ox and submit t	his form to th	ne court with your other	schedules. You	u have nothing else to	report on t	this form.	
Yes. F	Fill in all of t	the information	below.						
Part 1: Lis	st All Secu	red Claims							
for each claim.	If more than	n one creditor has	a particular c	e secured claim, list the cred claim, list the other creditors ording to the creditor's name	in Part 2. As	Column A Amount of claim Do not deduct the value of collateral.	Value of co that suppo claim		Column C Unsecured portion If any
	inancial		Describe th	e property that secures the	he claim:	\$8,714.00	\$4	4,250.00	\$4,464.00
Creditor's 200 R€	_{Name} enaissand	ce Ctr		urn Aura 163000 mil					
Detroi	t, MI 4824	13	Continge	ent					
Number, S	Street, City, Sta	ate & Zip Code	☐ Unliquid	ated					
Who owes th	ne debt? Ch	eck one	Disputed	d i en. Check all that apply.					
☐ Debtor 1 on☐ Debtor 2 on	nly		_	ement you made (such as m	nortgage or secu	red			
Debtor 1 an	=	only	☐ Statutory	y lien (such as tax lien, mec	hanic's lien)				
At least one	e of the debto	ors and another	☐ Judgme	nt lien from a lawsuit					
☐ Check if th communit		ates to a	Other (in	ncluding a right to offset) _					
Data dal f		Opened 09/11 Last Active	•	A distant	_{er} 4181				
Date debt was	s incurred	5/03/15	_ Last	4 digits of account numb	er 4101				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$8,714.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$8,714.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Document	<u>Page</u>	17.01	<u>0.5</u>	_		
Fill	in this infor	mation to identify your case	9:						
De	btor 1	Tiffany L. White							
		First Name	Middle Name	Last Name	1				
	btor 2								
(Spo	ouse if, filing)	First Name	Middle Name	Last Name	t.				
Uni	ited States Ba	ankruptcy Court for the: N	ORTHERN DISTRICT OF ILLIN	NOIS					
Ca	se number								
_	nown)						☐ Ch	eck if this is	s an
							am	ended filing	j
∩f	ficial Ear	m 106E/F							
			Have Unsecured C	`laim	•			12/	115
			rt 1 for creditors with PRIORITY			or creditors with NO	NPPIOPITY claim		
Scho Scho left. nam	edule G: Exectedule D: Credit Attach the Co e and case nu	utory Contracts and Unexpired itors Who Have Claims Secured	could result in a claim. Also list Leases (Official Form 106G). Do by Property. If more space is ne- you have no information to report	not inclueded, co	de any cre py the Part	editors with partially t you need, fill it out	secured claims the number the entri	nat are listed es in the bo	d in xes on the
		tors have priority unsecured cla							
	□ No. Go to	• •							
	Yes.								
2.	identify what to possible, list the Part 1. If more	ype of claim it is. If a claim has bo he claims in alphabetical order ac e than one creditor holds a particu	a creditor has more than one priority th priority and nonpriority amounts, cording to the creditor's name. If yo lar claim, list the other creditors in F ne instructions for this form in the in	list that count have means art 3.	laim here a ore than tw	and show both priority	and nonpriority am	ounts. As mu	uch as
	(i oi aii oipiai	idaion of odon type of oldini, ooo a			,	Total claim	Priority amount	Nonpri amoun	•
2.1	Interna	al Revenue Serivce	Last 4 digits of account	number		\$978.5	7 \$978	.57	\$0.00
	P.O. B	creditor's Name ox 7346	When was the debt incu	irred?	2015		_		
		elphia, PA 19101-7346 Street City State Zlp Code	As of the date you file, the	he claim	is: Check a	all that apply			
		ed the debt? Check one.	☐ Contingent						
	Debtor 1	only	☐ Unliquidated						
	Debtor 2	only	☐ Disputed						
	_	and Debtor 2 only	Type of PRIORITY unsec	cured cla	im:				
		one of the debtors and another	☐ Domestic support oblig						
	_	this claim is for a community of	_		ou owo tho	govornment			
		subject to offset?	☐ Claims for death or pe			•			
	■ No		Other. Specify		,				
	☐ Yes		tax	debt					
Dai	rt 2: List A	All of Your NONPRIORITY U	neacurad Claims						
3.		tors have nonpriority unsecured							
J.			- ,	athar a	مماريات مام				
	□ No. You na	ave nothing to report in this part. S	Submit this form to the court with yo	our otner s	cnedules.				
	Yes.								
4.	unsecured cla	im, list the creditor separately for	in the alphabetical order of the ceach claim. For each claim listed, ice other creditors in Part 3.lf you have	dentify wh	at type of c	claim it is. Do not list o	laims already inclu	ded in Part 1	. If more

Total claim

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Case number (if know)

Debt	or 1 Tiffany L. White	Case number (if know)	
4.1	Accounts Receivable Ma	Last 4 digits of account number	\$382.00
	Nonpriority Creditor's Name 2950 W Chicago Ave Ste 3 Chicago, IL 60622	When was the debt incurred? Opened 08/10	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Choice Collection Attorney America S Financial Choice	
4.2	Advocate Healthcare	Last 4 digits of account number	\$511.00
	Nonpriority Creditor's Name 2025 Windsor Dr. Hinsdale, IL 60523-9393	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical/Dental Service	
4.3	American Cash Nonpriority Creditor's Name	Last 4 digits of account number	\$383.00
	555 Torrence Calumet City, IL 60409	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Debtor 1 Tiffany L. White Case number (if know) 4.4 \$2,000.00 American First Finance Last 4 digits of account number Nonpriority Creditor's Name 3515 N Ridge Rd When was the debt incurred? #200 Wichita, KS 67205 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify furniture ☐ Yes 4.5 Americash Loans Last 4 digits of account number \$651.93 Nonpriority Creditor's Name When was the debt incurred? 880 Lee Street Suite 302 Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify payday loan ☐ Yes 4.6 \$480.00 Atg Credit Last 4 digits of account number 7828 Nonpriority Creditor's Name 1700 W Cortland St Ste 2 When was the debt incurred? **Opened 03/14** Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Mercy Hospital And** Other. Specify Medical Cen ☐ Yes

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Debtor 1 Tiffany L. White Case number (if know) 4.7 **Atg Credit** \$350.00 Last 4 digits of account number 9854 Nonpriority Creditor's Name 1700 W Cortland St Ste 2 When was the debt incurred? **Opened 11/12** Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney South Suburban** ■ Other. Specify College ☐ Yes 4.8 **BANK OF AMERICA** Last 4 digits of account number \$500.00 Nonpriority Creditor's Name P.O. BOX 44041 When was the debt incurred? JACKSONVILLE, FL 32231 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 Cci Last 4 digits of account number 5770 \$935.00 Nonpriority Creditor's Name Contract Callers I When was the debt incurred? Augusta, GA 30901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 10 Peoples Gas Light And Coke 266 ☐ Yes

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Case number (if know)

Debtor	1 Tiffany L. White	Case number (if know)	
4.1			• • • • • • • • • • • • • • • • • • • •
0	City of Chicago	Last 4 digits of account number	\$1,500.00
	Nonpriority Creditor's Name Dep't of Administrative Hearings 740 N. Sedgewick Street Chicago, IL 60654	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify streets and sanitation	
4.1	City of Chicago	Last 4 digits of account number	\$4,000.00
1	Nonpriority Creditor's Name		Ψ 1,000.00
	Dep't of Administrative Hearings 740 N. Sedgewick Street Chicago, IL 60654	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Tickets	
4.1	City of Chicago	Last 4 digits of account number	\$7,921.00
	Nonpriority Creditor's Name		
	Dep't of Administrative Hearings 740 N. Sedgewick Street Chicago, IL 60654	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Administrative Dept.	

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Case number (if know)

Debtor 1 Tiffany L. White 4.1 **Commonwealth Financial** 97N1 \$854.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 245 Main St When was the debt incurred? **Opened 10/14** Dickson City, PA 18519 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Mea-Ingalls ☐ Yes 4.1 **Commonwealth Financial** 87N1 \$341.00 Last 4 digits of account number Nonpriority Creditor's Name 245 Main St When was the debt incurred? **Opened 10/14** Dickson City, PA 18519 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Mea-Ingalls ☐ Yes 4.1 **Crd Prt Asso** 8929 \$292.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Po Box 802068 Dallas, TX 75380 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 10 Commonwealth Edison Company ☐ Yes

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Debtor 1 Tiffany L. White Case number (if know) 4.1 **Debt Recovery** \$297.00 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 9001 When was the debt incurred? Westbury, NY 11590 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify US Cellular ☐ Yes 4.1 **Dolton Dental** \$221.25 Last 4 digits of account number Nonpriority Creditor's Name 1350 E. Sibley blvd When was the debt incurred? Dolton, IL 60419 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical bill ☐ Yes 4.1 **Falls Collection Svc** 607A \$211.00 8 Last 4 digits of account number Nonpriority Creditor's Name Po Box 668 When was the debt incurred? **Opened 03/11** Germantown, WI 53022 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Acl Inc. ☐ Yes

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Case number (if know) Debtor 1 Tiffany L. White 4.1 \$103.00 **Falls Collection Svc** 4710 Last 4 digits of account number 9 Nonpriority Creditor's Name Po Box 668 When was the debt incurred? **Opened 05/14** Germantown, WI 53022 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Acl Inc. ☐ Yes 4.2 Fed Loan Serv 0003 \$2,651.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 10/10 Last Active Po Box 60610 When was the debt incurred? 4/30/15 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other, Specify Educational 4.2 Fed Loan Serv 0004 \$1,316.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/10 Last Active Po Box 60610 When was the debt incurred? 4/30/15 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational

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Case number (if know) Debtor 1 Tiffany L. White 4.2 \$297.00 First Premier Bank 9839 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 05/15 Last Active 601 S Minnesota Ave When was the debt incurred? 5/26/15 Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 First Premier Bank \$300.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 2667 When was the debt incurred? Houston, TX 77252 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Illinois Department of Employment** 4.2 \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **Benefit Repayments** PO Box 4385 Chicago, IL 60680-4385 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Case number (if know) Debtor 1 Tiffany L. White 4.2 \$336.00 Kohls/capone 4234 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 02/15 Last Active N56 W 17000 Ridgewood Dr When was the debt incurred? 5/15/15 Menomonee Falls, WI 53051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Lavtte Wright \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 541 E. 148th PI When was the debt incurred? Harvey, IL 60426 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **NOTICE ONLY** Other. Specify 4.2 Mcsi Inc 3308 \$250.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 327 When was the debt incurred? Palos Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 01 City Of Blue Island ☐ Yes

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	Case 10-22019 Duc 1	Decument Desc 27 of CE	ani
Debtor	Tiffany L. White	Document Page 27 of 65 Case number (if know)	
4.2	MICHAEL REESE Hospital	Last 4 digits of account number	\$575.00
	Nonpriority Creditor's Name P.O. BOX 52428 Phoenix, AZ 85072	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bill	
4.2	Nicor Advanced Energy	Last 4 digits of account number	\$700.00
	Nonpriority Creditor's Name P.O. Box 30093 Lansing, MI 48909-7593	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Northern Resolutions	Last 4 digits of account number	\$678.00
	Nonpriority Creditor's Name	When was the debt insurred?	
	PO Box 566 Amherst, NY 14226	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	····	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	

debt

■ No

☐ Yes

report as priority claims

■ Other. Specify payday loan

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

 $\hfill\Box$ Check if this claim is for a community

Is the claim subject to offset?

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Northern Resolutions	Last 4 digits of account number	\$350.0
Nonpriority Creditor's Name PO Box 566	When was the debt incurred?	
Amherst, NY 14226		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify payday loan	
Pinnacle Credit	Last 4 digits of account number	\$1,716.0
Nonpriority Creditor's Name		
Attn: Bankruptcy PO Box 640	When was the debt incurred?	
Hopkins, MN 55343		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify Verizon	
□ 165	Other. Specify Voltage	
Primary Healthcare Assoc. Nonpriority Creditor's Name	Last 4 digits of account number	\$350.0
4647 W. Lincoln Hwy. Matteson, IL 60443	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
•		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

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Debtor	1 Tiffany L. White	Case number (if know)	
4.3	Provident Hospital of Cook Co.	Last 4 digits of account number	\$839.20
4	Nonpriority Creditor's Name 500 E. 51st St.	When was the debt incurred?	ψ003.20
	Chicago, IL 60615		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical/Dental Services	
	La Tes	Other. Specify Medical/Berital del vides	
4.3			
5	Stellar Recovery Inc	Last 4 digits of account number 8604	\$892.00
	Nonpriority Creditor's Name 4500 Salisbury Rd Ste 10 Jacksonville, FL 32216	When was the debt incurred? Opened 12/14	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Attorney Comcast	
4.3	US BANK	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name		
	1959 BURNS AVENUE Saint Paul, MN 55108	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	

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Case number (if know) Debtor 1 Tiffany L. White 4.3 Virtuoso Sourcing Group \$1,323.64 Last 4 digits of account number Nonpriority Creditor's Name 3033 Parker Rd When was the debt incurred? Aurora, CO 80014 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Sprint 4.3 **Zmedi Health Center** \$265.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 6700 W. 167th When was the debt incurred? Tinley Park, IL 60477 As of the date you file, the claim is: Check all that apply Number Street City State ZIp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? ACL, Inc Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 27901 Part 2: Creditors with Nonpriority Unsecured Claims Milwaukee, WI 53227 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? ACL. Inc Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 27901 ■ Part 2: Creditors with Nonpriority Unsecured Claims Milwaukee, WI 53227 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address City of Blue Island Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2433 York Street Part 2: Creditors with Nonpriority Unsecured Claims Blue Island, IL 60406 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? City of Chicago Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims c/o Arnold Scott Harris PC Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

222 Merchandise Mart Plaza, #1932

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Case number (if know) Debtor 1 Tiffany L. White Chicago, IL 60654 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address City of Chicago Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 400 W. Superior ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60603 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address City of Chicago Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims c/o Arnold Scott Harris PC Part 2: Creditors with Nonpriority Unsecured Claims 222 Merchandise Mart Plaza, #1932 Chicago, IL 60654 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? City of Chicago Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 400 W. Superior Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60603 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Comcast Line 4.35 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1255 W. North Ave. Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60622 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Commonwealth Edison Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims C/O Harvard Collection Service ■ Part 2: Creditors with Nonpriority Unsecured Claims 4839 N. Elston Ave. Chicago, IL 60630-2534 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Cook Brothers** Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1740 N. Kostner Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60639 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Markoff Law LLC Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 29 N. Wacker Dr. #550 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60606 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Mea-Ingalls Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 740023 Part 2: Creditors with Nonpriority Unsecured Claims Cincinnati, OH 45274 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Mea-Ingalls Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 740023 Part 2: Creditors with Nonpriority Unsecured Claims Cincinnati, OH 45274 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Mercy Hospital & Medical Center** Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2525 S Michigan Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60616-2477 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Peoples Gas Light & Coke Co. Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 9037 ■ Part 2: Creditors with Nonpriority Unsecured Claims Addison, TX 75001 Last 4 digits of account number

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Debtor 1 Tiffany L. White		Case number (if know)	
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?	
South Suburban College	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
15800 S. State St. South Holland, IL 60473		■ Part 2: Creditors with Nonpriority Unsecured Claims	
South Holland, IL 00473	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?	
Sprint	Line 4.37 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Attn: Bankruptcy Dept. P.O. Box 8077		■ Part 2: Creditors with Nonpriority Unsecured Claims	
London, KY 40742			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?	
US Cellular	Line 4.16 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 7835 Madison, WI 53707-7835		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Widdison, Wi 33707-7033	Last 4 digits of account number		
Name and Address	•	2 did you list the original creditor?	
Verizon Wireless	Line 4.32 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
11601 Roosevelt Blvd. Saint Petersburg, FL 33716		Part 2: Creditors with Nonpriority Unsecured Claims	
came i clorabarg, i E cor io	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	978.57
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	978.57
				-	Total Claim
	6f.	Student loans	6f.	\$	3,967.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	32,305.02
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	36,272.02

			111 FAUE 33 01 03
Fill in this infor	mation to identify your	case:	
Debtor 1	Tiffany L. White		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS
Case number			
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

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		Documen	t Page 34 of 65	
Fill in thi	s information to identify your	case:		
Debtor 1	Tiffany L. White			
.	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT C	DF ILLINOIS	
Case nun	nber			☐ Check if this is an amended filing
	al Form 106H <mark>dule H: Your Cod</mark>	ebtors		12/15
people are ill it out, a our nam	e filing together, both are equand number the entries in the e and case number (if known)	ally responsible for supply boxes on the left. Attach t . Answer every question.	ring correct information. If mo	te and accurate as possible. If two married ore space is needed, copy the Additional Page, ge. On the top of any Additional Pages, write
□ No	1			
■ Ye	S			
			perty state or territory? (Comr to Rico, Texas, Washington, an	nunity property states and territories include d Wisconsin.)
■ No	o. Go to line 3.			
☐ Ye	s. Did your spouse, former spou	use, or legal equivalent live v	with you at the time?	
in lin Form	e 2 again as a codebtor only i	f that person is a guaranto	or or cosigner. Make sure you	pouse is filing with you. List the person shown have listed the creditor on Schedule D (Official Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		umn 2: The creditor to whom you owe the debt ck all schedules that apply:
3.1	Lavette Wright 541 w. 148th Pl Harvey, IL 60426		□ S □ S	chedule D, linechedule E/F, linechedule G Financial

Schedule H: Your Codebtors

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						1				
	in this information to identify your obtor 1 Tiffany L. V									
	btor 2	vinte			_					
	buse, if filing)				_					
Uni	ited States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILLINOIS		_					
	se number		-				if this is			
(II KI	nown)					l <u> </u>	amende	•		
									g postpetition ollowing date:	cnapter
<u>O</u>	fficial Form 106l					M	M / DD/ \	/YYY		
S	chedule I: Your Inc	ome								12/15
atta	rt 1: Describe Employment Fill in your employment	On the top of any additi	onal pages, write yo			l case nu	mber (if	known). A	nswer every	
	information.		Debtor 1						ling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ■ Not employed				☐ Empl	oyed mployed		
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Pai	rt 2: Give Details About Mo	onthly Income								
spo	imate monthly income as of the cuse unless you are separated.	•	,			·		·	·	J
	ou or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	n for all e	empio	oyers for t	nat perso	on on the II	nes below. If y	you neea
						For Deb	tor 1		btor 2 or ng spouse	
2.	List monthly gross wages, saldeductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$		0.00	\$	N/A	

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Deb	otor 1	Tiffany L. White	-	Cas	e number (if known)				
					or Debtor 1	non-	Debtor filing s	pouse	
	Cop	y line 4 here	4.	\$_	0.00	\$		N/A	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	- : -	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	· -	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		N/A	
	5e.	Insurance	5e.	\$	0.00	\$		N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$		N/A	
	5g.	Union dues	5g.		0.00	\$		N/A	
	5h.	Other deductions. Specify:	_ 5h.	+ \$_	0.00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$		N/A	
7.	Calc	rulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	\$	481.00	\$		N/A	
	8e.	Social Security	8e.	\$	0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Link	8f.	\$	173.00	\$		N/A	
	8g.	Pension or retirement income	8g.	_	0.00	\$		N/A	
	8h.	Other monthly income. Specify:	_ 8h.	+ \$	0.00	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	654.00	\$		N/A	
10	Calc	culate monthly income. Add line 7 + line 9.	10.	S	654.00 + \$		N/A	= \$	654.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					11//		034.00
11.	State Inclu	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a	depei		•		chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					12.	\$	654.00
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?					Combine monthly	
	_	IVO.							

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Fill i	in this information to identify your case:		I		
Debt	tor 1 Tiffany L. White		Chec	k if this is:	
Debt			_	An amended filing A supplement show	wing postpetition chapter
(Spo	ouse, if filing)		_	13 expenses as of	the following date:
Unite	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLI	INOIS	-	MM / DD / YYYY	
	e numbernown)				
Of	fficial Form 106J				
Sc	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to thi nber (if known). Answer every question.				
Part					
1.	Is this a joint case? No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expens	es for Separate House	ehold of Debt	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Sill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes □ No
					☐ No
					□ No
					☐ Yes
				-	□ No
	Da como como como de calcado				☐ Yes
3.	Do your expenses include expenses of people other than				
	yourself and your dependents?				
Esti expe	t2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless tenses as of a date after the bankruptcy is filed. If this is a sublicable date.				
the	lude expenses paid for with non-cash government assistance value of such assistance and have included it on Schedule I. ficial Form 106I.)	e if you know : Your Income		Your exp	enses
,					
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgag	e 4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5.	 Homeowner's association or condominium dues Additional mortgage payments for your residence, such as h 	home equity loans	4d. \$ 5. \$		0.00 66.00

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Debtor	Tiffany L. White	9	Case num	ber (if known)	
6. Ut	ilities:				
6a		atural gas	6a.	\$	0.00
6b	•	•	6b.	· · · · · · · · · · · · · · · · · · ·	0.00
6c	_	none, Internet, satellite, and cable services	6c.		50.00
6d		iono, internot, catolito, and cable convices	6d.	*	0.00
	od and housekeepin	a sunnlies		·	173.00
	ildcare and children	•	8.	·	0.00
_			9.	*	
	othing, laundry, and rsonal care products	· ·	9. 10.	· .	0.00
	•			· ·	0.00
	edical and dental exp	gas, maintenance, bus or train fare.	11.	Ф	0.00
	not include car paym		12.	\$	50.00
		ents. ecreation, newspapers, magazines, and book		·	0.00
		ns and religious donations	14.	· .	0.00
	surance.	is and rengious domanons	14.	Ψ	0.00
		e deducted from your pay or included in lines 4 or	20.		
	a. Life insurance	, addation from your pay or moladed in intes 4 or	15a.	\$	0.00
	b. Health insurance		15b.	·	0.00
	c. Vehicle insurance		15c.	·	100.00
	d. Other insurance.		15d.		0.00
		exes deducted from your pay or included in lines		Ψ	0.00
_	ecify:	.xes deducted from your pay or included in lines a	+ 01 20. 16.	\$	0.00
	stallment or lease pa	vments:		*	0.00
	a. Car payments for		17a.	\$	0.00
	b. Car payments for		17b.	·	0.00
	c. Other. Specify:		17c.	·	0.00
	d. Other. Specify:		17d.	·	0.00
		ony, maintenance, and support that you did n		Ψ	0.00
		y on line 5, Schedule I, Your Income (Official		\$	0.00
		ake to support others who do not live with yo		\$	0.00
Sr	ecify:		19.		
). O 1	her real property exp	penses not included in lines 4 or 5 of this form	or on Schedule I: Yo	our Income.	
20	 a. Mortgages on other 	er property	20a.	\$	0.00
20	b. Real estate taxes		20b.	\$	0.00
20	c. Property, homeow	ner's, or renter's insurance	20c.	\$	0.00
		air, and upkeep expenses	20d.	\$	0.00
		ociation or condominium dues	20e.		0.00
1 Of	her: Specify:			+\$	0.00
				Γ	0.00
	Iculate your monthly	•			
22	a. Add lines 4 through	21.		\$	439.00
22	b. Copy line 22 (montl	hly expenses for Debtor 2), if any, from Official Fo	orm 106J-2	\$	
22	c. Add line 22a and 22	2b. The result is your monthly expenses.		\$	439.00
	Iculate your monthly			_	
		r combined monthly income) from Schedule I.	23a.	·	654.00
23	b. Copy your monthly	y expenses from line 22c above.	23b.	-\$	439.00
	0.14				
23		on the state of the same of th	23c.	\$	215.00
	rne result is your	monthly net income.	230.	L*	2.0.00
4. De	vou expect an incre	ease or decrease in your expenses within the	vear after you file this	s form?	
		to finish paying for your car loan within the year or do y			ease or decrease because o
	dification to the terms of		, , , , , , , , , , , , , , , , , , , ,	. ,	
	No.				
		n here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Tiffany L. White				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
1					amended filing
Off: a: a! E a	400D				
Official Forr					
Declarat	tion About a	an Individual	Debtor's Sc	hedules	12/15
		r, both are equally respor			
obtaining mone	y or property by fraud i 8 U.S.C. §§ 152, 1341, 1	n connection with a bank	ruptcy case can result ir	Making a false statement n fines up to \$250,000, or i	mprisonment for up to 20
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person			Attach Bankruptcy	/ Petition Preparer's Notice,
				Declaration, and	Signature (Official Form 119)
	alty of perjury, I declare true and correct.	that I have read the sumi	mary and schedules filed	d with this declaration and	I
•					
	any L. White		X Signature of [Dobtor 2	
	y L. White Ire of Debtor 1		Signature of L	Jedioi Z	
2.3.144					
Date _	July 5, 2016		Date		

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Fill	in this inform	ation to identify you	r case:					
	otor 1	Tiffany L. White						
D 0.	3.01	First Name	Middle Name	Last Name				
l	otor 2 ouse if, filing)	First Name	Middle Name	Last Name				
Uni	ted States Bar	kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS				
Car	se number							
	nown)					Check if this is an mended filing		
Sta		of Financial		duals Filing for B	ankruptcy	4/10		
info	rmation. If me		attach a separate sheet to		y additional pages, write you			
Par	t 1: Give D	etails About Your Ma	arital Status and Where You	ı Lived Before				
1.	What is your	current marital statu	ıs?					
	□ Married■ Not marr	ried						
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?				
	■ No □ Yes. List	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.						
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there		
3. state					ity property state or territory ico, Texas, Washington and W			
	■ No □ Yes. Mal	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).				
Par	t 2 Explain	n the Sources of You	r Income					
4.	Fill in the total	I amount of income yo	u received from all jobs and	ng a business during this you all businesses, including part e together, list it only once ur		ndar years?		
	□ No							
	Yes. Fill	in the details.						
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$17,416.27	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Official Form 107

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Case number (if known) Debtor 1 Tiffany L. White

				Debtor 1		Debtor 2			
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)	
	r last calen nuary 1 to	dar year: December	31, 2015)	■ Wages, commissions, bonuses, tips	\$14,492.00	☐ Wages, common bonuses, tips	nissions,		
				☐ Operating a business		☐ Operating a b	usiness		
		dar year be December		■ Wages, commissions, bonuses, tips	\$8,724.00	☐ Wages, comn bonuses, tips	nissions,		
				☐ Operating a business		☐ Operating a b	usiness		
5.	Include include and other winnings. List each and the second sec	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two ner that income is taxable. Ex- pensions; rental income; inte- se and you have income that you ome from each source separa	amples of other income are a rest; dividends; money collect you received together, list it contains the contains and the cont	ted from lawsuits; renly once under Deb	oyalties; an otor 1.		
				Debtor 1		Dobtor 2			
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.	me	Gross income (before deductions and exclusions)	
		y 1 of curre filed for ba	nt year until nkruptcy:	Link	\$346.00				
				Unemployment	\$1,924.00				
	r last caler inuary 1 to	idar year: December	31, 2015)	Unemployment	\$2,655.00				
Pa	rt 3: Lis	t Certain Pa	nyments You	Made Before You Filed for	Bankruptcy				
6.	Are eithe	r Debtor 1's Neither D	or Debtor 2 ebtor 1 nor E	's debts primarily consume Debtor 2 has primarily consumers personal, family, or househo	r debts? umer debts. Consumer debts	s are defined in 11 l	J.S.C. § 10	1(8) as "incurred by an	
		During the	90 days befo	ore you filed for bankruptcy, di	id you pay any creditor a tota	l of \$6,425* or more)?		
		☐ Yes	paid that cr	each creditor to whom you pa editor. Do not include paymer	nts for domestic support oblig				
		* Subject		payments to an attorney for t t on 4/01/19 and every 3 year		or after the date of	adjustment		
	■ Yes.			or both have primarily consumer you filed for bankruptcy, di		of \$600 or more?			
		■ No.	Go to line 7	' .					
		□ Yes	include pay	each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not ments for domestic support obligations, such as child support and alimony. Also, do not include payments to a this bankruptcy case.					
	Creditor	's Name an	d Address	Dates of payme	ent Total amount	Amount you	Was this	payment for	

Case 16-22019 Doc 1 Filed 07/08/16 Entered 07/08/16 14:08:41 Document Page 42 of 65 ase number (if known) Debtor 1 Tiffany L. White Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address** Amount you Reason for this payment Dates of payment Total amount still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Amount you **Insider's Name and Address** Dates of payment **Total amount** Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number City of Chicago v. Tiffany White Registration of Richard J Daley Center Pending 2011-M1-662361 Administrative 50 W. Washington □ On appeal **Judgment** Chicago, IL 60602 □ Concluded State Farm Fire CA v. Tiffany WHite **Property Damage** Richard J Daley Center □ Pending 2015-M1-014645 50 W. Washington □ On appeal Chicago, IL 60602 Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☐ Yes

No

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Case number (if known) Document Debtor 1 Tiffany L. White

Pa	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	ccy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	cy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cont	ribution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	I Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptor gambling? ■ No □ Yes. Fill in the details.	y or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
			D-1	Malara at announced
	how the loss occurred	escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pre	ey, did you or anyone else acting on your behalf pay of paring a bankruptcy petition? parers, or credit counseling agencies for services required		erty to anyone you
	□ No			
	Yes. Fill in the details.			
		5		
	Person Who Was Paid Address Email or website address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not You	***********		* 0.00
	Ledford, Wu & Borges, LLC 105 West Madison 23rd Floor Chicago, IL 60602	\$4000.00 in attorneys fees, \$0.00 paid pre-petition, \$4000.00 to be paid through plan.		\$0.00
	CIN Legal Data Services 4540 Honeywell Ct	\$60.00 paid total costs including merged credit report and credit	5/31/2016	\$60.00
7.	Dayton, OH 45424 Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you have not include any payment or transfer that you have not yes. Fill in the details. Person Who Was Paid Address		or transfer any prope Date payment or transfer was	erty to anyone who Amount of payment
			made	. ,

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Case number (if known) Document

Debtor 1 Tiffany L. White

8.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your bull include both outright transfers and transfers mainclude gifts and transfers that you have alread No	usiness or financial affa ade as security (such as t	airs? he granting of a s					
	Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and v property transferr		payme	be any property or nts received or debts exchange	Date transfer was made		
	Person's relationship to you							
 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you beneficiary? (These are often called asset-protection devices.) No 					of which you are a			
	Yes. Fill in the details.							
	Name of trust	Description and v	alue of the prop	erty transf	erred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Ins	struments. Safe Denosit	Boxes, and Sto	rage Units	•			
ı aı	List of Octum 1 manoial Accounts, inc	on amento, care Deposit	. Boxes, and oto	rage office	,			
<u>2</u> 0.	Within 1 year before you filed for bankruptcy sold, moved, or transferred?	•				,		
		Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No						
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accourtinstrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, any	y safe dep	osit box or other depos	itory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?		
22.	Have you stored property in a storage unit of	or place other than your	home within 1 y	ear before	you filed for bankrupto	cy?		
	■ No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?		
Par	t 9: Identify Property You Hold or Control	for Someone Else						
	Do you hold or control any property that so		ude any property	you borro	owed from, are storing f	for, or hold in trust		
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	he property	Value		
Par	t 10: Give Details About Environmental Info	ormation						
or 1	the purpose of Part 10, the following definition	ons apply:						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Tiffany L. White

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.				,		
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.						
24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
		No					
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
25.	Hav	re you notified any governmental unit of	any release of hazardous material?				
		■ No □ Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
26.	Hav	re you been a party in any judicial or adm	ninistrative proceeding under any envi	ronr	mental law? Include settlements a	nd orders.	
	■ No □ Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case	
Par	t 11:	Give Details About Your Business or	Connections to Any Business				
27.	Wit	— hin 4 years before you filed for bankrupt	cv. did vou own a business or have an	v of	the following connections to any	business?	
		☐ A sole proprietor or self-employed in		•	•		
		☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (L	.LP)		
		☐ A partner in a partnership					
		☐ An officer, director, or managing exe	ng executive of a corporation				
		☐ An owner of at least 5% of the voting or equity securities of a corporation					
		■ No. None of the above applies. Go to Part 12.					
		Yes. Check all that apply above and fill		S .			
	Ad	siness Name dress	Describe the nature of the business		Employer Identification number Do not include Social Security r		
	(Nu	mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed		
28.		hin 2 years before you filed for bankrupt citutions, creditors, or other parties.	cy, did you give a financial statement t	to ar	nyone about your business? Inclu	de all financial	
		No					
		Yes. Fill in the details below.					
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued				
_		=					

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

Filed 07/08/16 Entered 07/08/16 14:08:41 Desc Main Case 16-22019 Doc 1 Document

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Tiffany L. Whi	e
Tiffany L. White	Signature of Debtor 2
Signature of Debto	1
Date July 5, 20	6 Date
Did you attach addi ■ No	ional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
☐ Yes	
Did you pay or agre	to pay someone who is not an attorney to help you fill out bankruptcy forms?
No	
☐ Yes Name of Per	on Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing tee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$0.00

toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: July 5, 2016	,
Signed:	
/s/ Tiffany L. White	/s/ George M. Vogl, IV ARDC #
Tiffany L. White	George M. Vogl, IV ARDC # 6273590
	Attorney for the Debtor(s)
Debtor(s)	
Do not sign this agreement if the amounts	s are blank. Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Tiffany L. Wh	ite			Case No.	
				Debtor(s)	Chapter	13
	DIS	CLO	OSURE OF COMPI	ENSATION OF ATTORN	NEY FOR DE	EBTOR(S)
c	ompensation paid t	o me v	within one year before the fil	16(b), I certify that I am the attorney ling of the petition in bankruptcy, or n of or in connection with the bankruptcy.	agreed to be paid	to me, for services rendered or to
	For legal service	es, I h	nave agreed to accept		\$	4,000.00
	Prior to the fili	ng of t	this statement I have received	d	\$	0.00
	Balance Due				\$	4,000.00
2. \$	310.00 of the	filing	g fee has been paid.			
3. T	The source of the co	mpens	sation paid to me was:			
	Debtor		Other (specify):			
4. T	The source of comp	ensatio	on to be paid to me is:			
	Debtor		Other (specify):			
5. I	I have not agree	d to sh	hare the above-disclosed con	npensation with any other person un	less they are mem	bers and associates of my law firm.
[nsation with a person or persons who names of the people sharing in the co		
6. I	n return for the abo	ve-dis	sclosed fee, I have agreed to	render legal service for all aspects of	of the bankruptcy c	ase, including:
b c	 Preparation and Representation of [Other provision Exemption 	filing of f the d s as ne n pla	of any petition, schedules, st debtor at the meeting of cred- eeded] unning; preparation and	dering advice to the debtor in determatement of affairs and plan which mitors and confirmation hearing, and filling of reaffirmation agreeme SC 522(f)(2)(A) for avoidance of	ay be required; any adjourned hea nts and applica	rings thereof;
7. E	By agreement with to Represer	he det tatio	btor(s), the above-disclosed fin of the debtors in any d	fee does not include the following selischargeability actions or any	ervice: other adversary	/ proceeding.
				CERTIFICATION		
	certify that the fore ankruptcy proceeding		g is a complete statement of a	any agreement or arrangement for pa	nyment to me for re	epresentation of the debtor(s) in
Ju	ıly 5, 2016			/s/ George M. Vogl,	IV ARDC #	
	nte			George M. Vogl, IV Signature of Attorney Ledford, Wu & Borg 105 W. Madison 23rd Floor Chicago, IL 60602 312-853-0200 Fax:	ARDC # 627359 ges, LLC	0
				notice@billbusters.		
				Name of law firm		

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<u>41 Desc Main</u>.

LEDFORDOWN & BOR CARGE 157COf 65

105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

CONSULTATION AGREEMENT

FOR OFFICE USE
Client No. 0 | 37
Interviewing Afforney 111

THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
- 3. Client's Duties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
- 4. Services: The attorney agrees to provide Client with the following services:
 - a. analyzing Client's financial circumstances based on information provided by Client;
 - b. to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;
 - if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client's
 options, informing Client what additional information Client needs to provide in order to enable Attorney to
 provide such advice and information;
 - d. where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and
 - e. to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client

Fees (check one):

A consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-client relationship shall terminate at the conclusion of the interview

Client agrees to pay \$__

in nonrefundable consultation fee

In the event Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charged for the case, and a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signed by Client and Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detailed explanation of the parties' obligations and a breakdown of the costs.

6. Acknowledgement: Client acknowledges that the first date upon which Attorney provided any bankruptcy assistance to Client is the date noted above, and that Attorney provided Client with a copy of this agreement and the disclosure and information mandated by Section 527(b) of the Bankruptcy Code.

Attorney Signature: ARDC #: 6273590

Case 16-22019 Doc 1

105 W. Madison, 23rd Floor, Chicago, IL 60602

(312)853-0200 Fax: (312)873-4693

ATTORNEY RETENTION CONTRACT

Responsible attorney: 6 MV

l.	Parties. In this contract, "Chent" means the undersigned, both individually and jointly; "Attorney" means Ledford, Wu & Borges, LLC and						
its	s staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of inconsistency. In the						
ev	event of any inconsistency between this contract and a Court-Approved Retention Agreement, the latter shall prevail.						
2.	Services: Client retains Attorney for the following services: A Chapter 13 bankruptcy (debt adjustment)						
3.	Scope of Representation:						

(a) Attorney will counsel and represent Client in all aspects of the above matter(s) for the fee specified in Paragraph 4 EXCEPT: (1)

adversary proceedings; (2) post-discharge litigation; (3) appeals; (4) other (specify): (b) Attorney may agree, but is not obligated, to represent Client in the above excluded matters for an additional fee, to be agreed upon 150 + \$310. WPC) separately by the parties. \$500 + \$50 + \$310 - Wout Fees: **M** Legal fee: \$ 4,000 ~ PLUS \$310 filling fee (court cost) (an additional Court-Approved Retention Agreement may apply)

50-22f Expenses: \$ xpenses: \$ 50 (merged credit report and credit counseling)
TOTAL: \$ 4,050 | less retainer received: \$ 50 | F Fee balance: S The legal fee is an 🕅 advance payment retainer 🗖 security retainer 🗖 classic retainer, and is a flat fee unless otherwise stated. Attorney

is unable to represent Client without receiving an advance payment retainer since a security retainer will be within the reach of Client's creditors. Should hourly billing be necessary, Attorney's billing rates are \$300-\$400/hour for partners, \$250/hour for associates, and \$90/hour for law clerks. The filing fee and expenses are subject to change at any time. The billing rates are subject to an annual review and potential increase every calendar year.

The legal fee covers the initial consultation and all subsequent work. The case may be closed if the fees are not paid by the deadline. Additional legal fees may apply if the parties have entered into a Court-Approved Retention Agreement and such Agreement so authorizes, or if the case is converted from one chapter to another. Additional court costs may apply for amending a petition, list, schedule or statement postfiling or other reasons not due to Attorney's fault. NSF checks will be assessed a \$20 fee.

5. Initial Consultation. Client acknowledges that Attorney has explained the following (please initial):

The options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2

_ The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures

The difference among various types of retainer and that Client has made the choice identified in Paragraph 4 A Chapter 13 plan will be submitted to the Court in good faith. The plan payment may have to increase if creditor claims come in higher than scheduled, creditors successfully argue that they are entitled to a higher interest rate, the Trustee successfully argues that the budgeted income is lower than actual income, the Trustee successfully argues that budgeted expenses are unreasonably high or the Court makes a finding that the plan is not the best effort you can make to repay your creditors.

) TIME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected or otherwise adversely affect Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requested documents and/or information, including but not limited to a certificate of credit counseling, are received by Attorney Other (specify):

Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time, and may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed.

- Client's Duties. Client agrees, during the course of representation, to:
- (a) provide Attorney with full, accurate and timely information, financial and otherwise;
- (b) follow Attorney's procedures and cooperate with Attorney in providing requested documents and information;
- (c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty;
- (d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit card or line of credit, or using an existing credit card or line of credit; and
- (c) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.
- 7. Co-counsel. Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ outside counsel, at Attorney's expense, to work on this case, including: Kathleen W. Vaught, Kelly M. Johnson, David Carter, or Christina Banyon.
- 8. Termination. Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, and Client will reimburse Attorney for any expenses, including those that otherwise would be free of charge, and authorizes Attorney to apply the filing fee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein.

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United States Bankruptcy Court Northern District of Illinois

In re	Tiffany L. White		Case No.		
		Debtor(s)	Chapter 13		
	VF	RIFICATION OF CREDITOR M	ATRIX		
	V L	KIFICATION OF CREDITOR W			
		Number of Creditors: 60			
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Doto	July 5, 2016	/s/ Tiffany L. White			
Date.	July 3, 2010	Tiffany L. White			
		Signature of Debtor			

Accounts Receivable Ma 2950 W Chicago Ave Ste 3 Chicago, IL 60622

ACL, Inc P.O. Box 27901 Milwaukee, WI 53227

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Advocate Healthcare 2025 Windsor Dr. Hinsdale, IL 60523-9393

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

American Cash 555 Torrence Calumet City, IL 60409

American First Finance 3515 N Ridge Rd #200 Wichita, KS 67205

Americash Loans 880 Lee Street Suite 302 Des Plaines, IL 60016

Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622

Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622

BANK OF AMERICA P.O. BOX 44041 JACKSONVILLE, FL 32231 Cci Contract Callers I Augusta, GA 30901

City of Blue Island 2433 York Street Blue Island, IL 60406

City of Chicago Dep't of Administrative Hearings 740 N. Sedgewick Street Chicago, IL 60654

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City of Chicago Dep't of Administrative Hearings 740 N. Sedgewick Street Chicago, IL 60654

City of Chicago c/o Arnold Scott Harris PC 222 Merchandise Mart Plaza, #1932 Chicago, IL 60654

City of Chicago 400 W. Superior Chicago, IL 60603

City of Chicago c/o Arnold Scott Harris PC 222 Merchandise Mart Plaza, #1932 Chicago, IL 60654

City of Chicago 400 W. Superior Chicago, IL 60603

Comcast 1255 W. North Ave. Chicago, IL 60622 Commonwealth Edison C/O Harvard Collection Service 4839 N. Elston Ave. Chicago, IL 60630-2534

Commonwealth Financial 245 Main St Dickson City, PA 18519

Commonwealth Financial 245 Main St Dickson City, PA 18519

Cook Brothers 1740 N. Kostner Ave Chicago, IL 60639

Crd Prt Asso Attn: Bankruptcy Po Box 802068 Dallas, TX 75380

Debt Recovery PO Box 9001 Westbury, NY 11590

Dolton Dental 1350 E. Sibley blvd Dolton, IL 60419

Falls Collection Svc Po Box 668 Germantown, WI 53022

Falls Collection Svc Po Box 668 Germantown, WI 53022

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

First Premier Bank PO Box 2667 Houston, TX 77252

Illinois Department of Employment S Benefit Repayments PO Box 4385 Chicago, IL 60680-4385

Internal Revenue Serivce P.O. Box 7346 Philadelphia, PA 19101-7346

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Lavette Wright 541 w. 148th Pl Harvey, IL 60426

Lavtte Wright 541 E. 148th Pl Harvey, IL 60426

Markoff Law LLC 29 N. Wacker Dr. #550 Chicago, IL 60606

Mcsi Inc Po Box 327 Palos Heights, IL 60463

Mea-Ingalls PO Box 740023 Cincinnati, OH 45274

Mea-Ingalls PO Box 740023 Cincinnati, OH 45274 Mercy Hospital & Medical Center 2525 S Michigan Ave Chicago, IL 60616-2477

MICHAEL REESE Hospital P.O. BOX 52428 Phoenix, AZ 85072

Nicor Advanced Energy P.O. Box 30093 Lansing, MI 48909-7593

Northern Resolutions PO Box 566 Amherst, NY 14226

Northern Resolutions PO Box 566 Amherst, NY 14226

Peoples Gas Light & Coke Co. PO Box 9037 Addison, TX 75001

Pinnacle Credit Attn: Bankruptcy PO Box 640 Hopkins, MN 55343

Primary Healthcare Assoc. 4647 W. Lincoln Hwy. Matteson, IL 60443

Provident Hospital of Cook Co. 500 E. 51st St. Chicago, IL 60615

South Suburban College 15800 S. State St. South Holland, IL 60473

Sprint Attn: Bankruptcy Dept. P.O. Box 8077 London, KY 40742 Stellar Recovery Inc 4500 Salisbury Rd Ste 10 Jacksonville, FL 32216

US BANK 1959 BURNS AVENUE Saint Paul, MN 55108

US Cellular P.O. Box 7835 Madison, WI 53707-7835

Verizon Wireless 11601 Roosevelt Blvd. Saint Petersburg, FL 33716

Virtuoso Sourcing Group 3033 Parker Rd Aurora, CO 80014

Zmedi Health Center 6700 W. 167th Tinley Park, IL 60477